Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>5-5-2011</u>	Address	: Kemp Rd 1/2 mile from
Case #:	<u>96-06755</u>		Governor's Trace, Eckerty
County:	Crawford		
Type of Laboratory Seizure (check one)		Seizure Location (check all that apply)	
□ Operation □ Chemics □ Dumpsi	al/Glassware/Equipment (only)	Residence Outbuilding Vehicle	☐ Hotel/Motel ☐ Open No Structure ☐ Other:
Items Foun	id: Location (bedroom, kitchen, open ai	r, etc)	-
(check all that apply) Lithium/Ammonia Reaction(s):			
Red Phosphorous/fodine Reaction(s):			
Flammable Solvents:			
☐ Water Reactive Metal (Lithium):			
☐ Hydrochloric Acid Gas Generator(s):			
Anhydrous Ammonia:			
⊠ Corrosiv	re Acid:		
☐ Corrosiv	/e Base:		
Other (it	em and location):		
☐ Yes ☐ No ☐ Children Living cond Estimated lo	r age 18 discovered (check appropriate (number present) not present but evidence they reside itions of home: clean disarray ength of time manufacturing had been nformation:	or visit often	
This report	has been faxed* to the following as	gencies that serve	the location:
Health Depa	nent: <u>English VFD</u> artment: <u>Crawford Co</u> of Child Services: <u>N/A</u>	I/ax: <u>Har</u> Fax: <u>338</u> Fax: <u>N/A</u>	
	nformation regarding this methamphe v Officer: K. Smith Phot		contact

This form is to be faxed to the Pire Department, Health Department and/or Department of Child Services listed within 24 hours of scene processing.